## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

09699923

| . CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                |                                |              |                  |              | SMALL ENTITY TYPE  |                        |                         | OTHER THAN R SMALL ENTITY |                        |  |
|--|--|---|----------------|--------------------------------|--------------|------------------|--------------|--------------------|------------------------|-------------------------|---------------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 24             |                                |              |                  |              | RATE               | FEE                    | OR<br><b>7</b>          | RATE                      | FEE                    |  |
| FOR  |  |   | NUMBER FILED   |                                | NUMB         | BER EXTRA        |              | BASIC FEE          | <del> </del>           |                         | BASIC FEE                 |                        |  |
| TC   | TAL CHARGE                                     | ABLE CLAIMS                               | 2 / minus 20=  |                                | * 4          | * 4              |              | X\$ 9=             |                        | 1                       |                           |                        |  |
| INDEPENDENT CLAIMS   |  |   | 2 minus 3 =    |                                | * /          |                  | •            |                    |                        | OR                      | X\$18=                    | 72.00                  |  |
| <u> </u>   |  | NDENT CLAIM P                             |                |                                |              |                  | •            | X40=               |                        | OR                      | X80=                      |                        |  |
| * If the difference in column 1 is less than zero, ente  |  |   |                |                                | - "O" in c   |                  |              | +135=              |                        | OR                      | +270=                     |                        |  |
| .,   |  |   |                |                                |              | olumn 2          |              | TOTAL              | L                      | OR                      | TOTAL                     | 782-00                 |  |
|  | C  | (Column 1)                                | (Colur         | nn 2) (Column 3)               |              |                  | SMALL ENTITY |                    |                        | OTHER THAN SMALL ENTITY |                           |                        |  |
| MENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>OUSLY | PRESENT<br>EXTRA |              | RATE               | ADDI-<br>TIONAL<br>FEE |                         | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
| <b>AMENDMENT</b>   | Total  | *   | Minus          | **                             |              | =                |              | X\$ 9=             |                        | OR                      | X\$18=                    |                        |  |
|  | Independent                                    | *<br>ENTATION OF MU                       | Minus          | ***                            | T CL AINA    | =                |              | X40=               |                        | OR                      | X80=                      |                        |  |
| _  | 7 11 10 1 1 11 20 2                            | INTERIOR OF MIC                           | JEIN EE DEI    | CINDLINI                       | CLAIIVI      |                  |              | +135=              |                        | OR                      | +270=                     |                        |  |
|  |  |   |                |                                |              |                  | <b>L</b>     | TOTAL<br>DDIT. FEE | <del></del>            | OR                      | TOTAL<br>ADDIT. FEE       |                        |  |
|  |  | (Column 1)                                |                | (Colur                         |              | (Column 3)       | . ^          |                    |                        |                         | NODIT. I EE               |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUMI<br>PREVIC<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |              | RATE               | ADDI-<br>TIONAL<br>FEE |                         | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus          | **                             |              | =                |              | X\$ 9=             |                        | OR                      | X\$18=                    |                        |  |
|  | Independent                                    | *   | Minus          | ***                            |              | =                |              | X40=               |                        | OR                      | X80=                      |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                |              |                  |              | .105               |                        |                         | .070                      |                        |  |
|  |  |   |                |                                |              |                  |              | +135=<br>TOTAL     |                        | OR                      | +270=<br>TOTAL            |                        |  |
|  |  | <b>(0.1</b>                               |                | . A[                           | DDIT. FEE    |                  | OR A         | ADDIT. FEE         |                        |                         |                           |                        |  |
|  |  | (Column 1)<br>CLAIMS                      |                | (Colun                         |              | (Column 3)       | _            | <del></del>        | <del></del>            |                         |                           |                        |  |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT           |                | NUME<br>PREVIO<br>PAID F       | DUSLY        | PRESENT<br>EXTRA |              | RATE               | ADDI-<br>TIONAL<br>FEE |                         | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  |   | Minus          | **                             |              | =                |              | X\$ 9=             |                        | OR                      | X\$18=                    |                        |  |
|  | Independent                                    |   | Minus          | ***                            |              | =                |              | X40=               |                        | OR                      | X80=                      |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                |              |                  |              |                    |                        | ľ                       |                           |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                |                                |              |                  |              |                    |                        | OR                      | +270=                     |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box |  |   |                |                                |              |                  |              |                    |                        |                         | TOTAL<br>DDIT. FEE        |                        |  |
| T  | he "Highest Num                                | ber Previously Paid                       | For" (Total or | Independe                      | nt) is the   | highest number   | found        | d in the appr      | opriate box            | in colu                 | mn 1.                     |                        |  |